

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA		07-23-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TH	1118	8-16-01
RESPONSE FORMALITY REVIEW	SI	1021	11/26/01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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For  
(Re)

25532  
 8/17/01  
 252  
 10-27-11